THE PROVEN CODE

Ashwagandha. KSM-66®

The world's most clinically studied ashwagandha root extract. Now in India's first clinical blister format, with batchwise third-party proof of ≥5% withanolides.

- 50+ clinical studies
- ≥5% withanolides, batch-verified
- India's first clinical blister

FIRST EDITION · 2026

ISSUED BY NUVEA ESSENTIALS (OPC) PVT LTD

Every claim. *Proven.*

AUTHORED BY GAURAV SINGH · FOUNDER, THE PROVEN CODE

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Table of *contents*.

Sixteen sections. Two decades of human research. One verified root extract.

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THE PROOF PROMISE

SECTION 01

Adaptogens demand *proof*.

Ashwagandha is the most sold herb in India. Almost none of it is verified. This dossier is the answer to one question: why The Proven Code KSM-66, and not another ashwagandha capsule?

Three things, all verifiable.

First, the active is KSM-66® — the world's most clinically studied ashwagandha, a full-spectrum, root-only extract produced by Ixoreal Biomed through 14 years of R&D. Generic ashwagandha is sold by hundreds of brands. KSM-66® is the single extract behind the published human trial record.

Second, every batch is verified. A third-party laboratory report on each lot proves the extract is authentic KSM-66® and standardised to at least 5% withanolides. The category prints "5% withanolides" on the label and tests almost none of it.

Third, the format is clinical. 500 mg of KSM-66® per HPMC capsule, zero additives, in a batch-stamped 10-capsule blister — India's first KSM-66® in a format built for the clinic, not the retail shelf.

01

50+ clinical studies

The most clinically studied ashwagandha root extract on earth. 4,200+ cumulative participants.

02

≥5% withanolides

Batchwise third-party lab proof of potency and KSM-66® authenticity, per lot.

03

Clinical blister

India's first KSM-66® in a 10-capsule blister. 500 mg. Zero additives.

THE THREE PROOF PILLARS

THE PRODUCT

SECTION 02

KSM-66® Ashwagandha. *500 mg.*

A single-ingredient, root-only adaptogen. The branded extract behind two decades of human clinical research, in a clean 500 mg HPMC capsule.

PRODUCT NAME
Clean Label Ashwagandha KSM-66®

ACTIVE INGREDIENT
KSM-66® · branded, root-only, clinically studied

BOTANICAL SOURCE
Withania somnifera · root only

PLANT PART
Root only · full-spectrum (no leaf)

EXTRACTION
Green chemistry · no alcohol or synthetic solvents

STANDARDIZATION
≥5% withanolides (HPLC) · batch-verified

PER CAPSULE
500 mg KSM-66® root extract

CAPSULE TYPE
Vegetarian HPMC (plant cellulose)

EXCIPIENTS
Zero · no fillers, binders, or additives

PACK FORMAT
10-capsule blister · monocarton

RECOMMENDED USE
As directed by a healthcare professional

COUNTRY OF ORIGIN
India

SHELF LIFE
36 months from manufacture

MANUFACTURING
Dior Pharmaceuticals · WHO-GMP, ISO 9001:2015

AVAILABLE FORMAT

Clinical Blister Pack · 10 vegetarian capsules

Batch-stamped blister strip of 10 HPMC capsules in a monocarton. India's first KSM-66® in a blister format — built for clinical dispensing and patient sampling. Also available as a 30-capsule pack.

KSM-66® IS A REGISTERED TRADEMARK OF IXOREAL BIOMED INC., USA · FSSAI · AYUSH LIC. 919/AY-PB · NON-GMO

THE THREE HIDDEN TRUTHS

SECTION 03

What most ashwagandha brands *won't tell you*.

Three problems define the ashwagandha category in India. Almost no brand acknowledges them. Physicians and distributors deserve to.

01 Generic ashwagandha is not *KSM-66®*.

The branded root extract carries the trial record. Generic powder does not.

Ashwagandha is India's most sold herb, offered by hundreds of brands. Many use cheap leaf material or undisclosed root-and-leaf blends. The published human RCTs were run on one full-spectrum, root-only extract: KSM-66®.

- **Root only** · KSM-66® uses only the root, per Ayurvedic tradition. Leaf-bearing extracts have a different constituent and safety profile.
- **Branded extract** · Clinical efficacy is established for KSM-66® specifically. The data does not transfer to unbranded raw material.
- **Green chemistry** · Extracted without alcohol or synthetic solvents — 14 years of R&D behind the process.

CONTINUED
SECTION 03

02 “5% withanolides” is printed, *rarely verified*.

The number on the label is a claim. On most products it is never tested.

Withanolides are the active steroidal lactones in ashwagandha, and content varies by source, season, and processing. Most brands print “5%” and never test the finished lot. The Proven Code publishes a third-party lab report for every batch.

- **Batchwise proof** · A third-party report on each lot confirms ≥5% withanolides and authentic KSM-66® identity.
- **HPLC method** · Withanolide content measured by HPLC against the KSM-66® reference, not estimated.
- **Source to shelf** · Traceable from Ixoreal’s farms through manufacture to the sealed blister.

03 Ashwagandha is sold loose, *never clinical*.

The category is bottles of loose capsules. None are built for the clinic.

A jar of unmarked capsules cannot be dispensed, sampled, or audited by lot in clinical practice. The Proven Code is India’s first KSM-66® brand to supply the extract in a batch-stamped blister strip — a format a clinician can actually use.

- **India’s first** · The first KSM-66® product in India offered in a 10-capsule blister format.
- **Dispensable** · Each strip is batch-stamped, sealed, and built for clinic dispensing and patient sampling.
- **Clean label** · 500 mg KSM-66® and a vegetarian HPMC shell. Nothing else.

THE EVIDENCE BASE

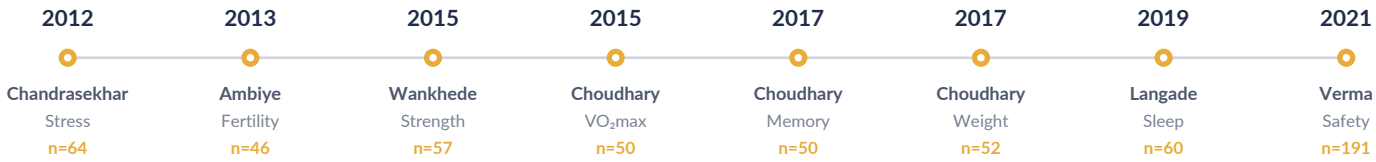
SECTION 04

Since 2012. 50+ studies. *4,200+ participants*.

A continuous human research record on a single standardised root extract. Almost no botanical in the adaptogen category can match this depth of evidence.

The clinical record on KSM-66® opens with the landmark 2012 stress trial and runs to the present day. Each published trial used the same full-spectrum, root-only extract, standardised to ≥5% withanolides and produced by Ixoreal Biomed through a green-chemistry process. KSM-66® is the most clinically studied ashwagandha root extract in the world, with more than 50 human clinical studies on record.

Three domains anchor the evidence: stress and cortisol, hormonal and physical performance, and cognition and sleep — the conditions an Indian physician sees every day.



KSM-66® CLINICAL RESEARCH PROGRAMME · THE MOST CLINICALLY STUDIED ASHWAGANDHA

50+ studies · *4,200+ participants*

CLINICAL EVIDENCE · LEAD TRIAL

SECTION 05

60 days. 64 adults. *27.9% lower cortisol*.

The 2012 Chandrasekhar trial. The landmark study that established KSM-66® as a cortisol-lowering adaptogen — and put it on the clinical map.

PRIMARY OUTCOMES

SERUM CORTISOL

27.9% Reduction from baseline (vs 7.9% placebo). P=0.0006.

PERCEIVED STRESS

44% Reduction on the Perceived Stress Scale (PSS).

GENERAL HEALTH

72.3% Improvement on GHQ-28 stress score from baseline.

STUDY DESIGN

DESIGN
Randomized, double-blind, placebo-controlled

POPULATION
64 adults with chronic stress

DURATION
60 days

DOSE
300 mg KSM-66® twice daily (600 mg/day)

MEASURES
Serum cortisol · PSS · GHQ-28 · DASS

PUBLICATION
Indian J Psychol Med, 2012

AUTHORS
Chandrasekhar, Kapoor, Anishetty

SAFETY Adverse effects were mild and comparable to placebo. No serious adverse events were reported over 60 days.

WHAT THIS MEANS The same root extract, at a clinically studied dose, is in every capsule of The Proven Code KSM-66® Ashwagandha.

CLINICAL EVIDENCE · SUPPORTING TRIAL

SECTION 06

8 weeks. Strength, recovery, *testosterone*.

The 2015 Wankhede trial. A randomized controlled study pairing KSM-66® with resistance training — with objective, gold-standard endpoints.

DESIGN
RDBPC

POPULATION
57 healthy men, 18–50

DURATION
8 weeks

DOSE
600 mg/day

METHOD
1-RM · DEXA-style · serum testosterone

PUBLICATION
J Int Soc Sports Nutr, 2015

PRIMARY & SECONDARY OUTCOMES

BENCH 1-RM
+46 kg
vs +26 kg placebo

BODY FAT
−3.5%
vs −1.5% placebo

TESTOSTERONE
sig.
significant rise vs placebo

RECOVERY
CK
lower creatine kinase

WHY THIS TRIAL MATTERS

Strength was measured by 1-rep-max, body fat by gold-standard methods, and testosterone by serum assay — objective endpoints, not questionnaires. Ashwagandha supplementation produced significantly greater gains in muscle strength and size, a larger rise in testosterone, lower exercise-induced muscle damage, and greater fat loss than placebo. It is the first such trial on a standardised, branded ashwagandha extract.

THE CLINICAL EVIDENCE TABLE

SECTION 04A

The principal trials, *one by one*.

A structured summary of the principal published human RCTs behind KSM-66® — study, design, and the outcomes that matter to a prescribing clinician.

KSM-66® has been evaluated in more than 50 human clinical studies, the great majority randomized, double-blind, and placebo-controlled. The table on the following pages sets out the principal published trials across seven clinical domains — the strongest, most-cited evidence in each. The two lead trials, Chandrasekhar 2012 and Wankhede 2015, are detailed in Sections 05 and 06.

SEVEN DOMAINS OF EVIDENCE

STRESS, ANXIETY & MOOD	Cortisol, perceived stress, anxiety — the adaptogenic core.
SLEEP	Onset latency, quality, and efficiency; healthy adults and insomnia.
STRENGTH, ENDURANCE & RECOVERY	1-RM strength, VO_2max, recovery, body composition.
SEXUAL & HORMONAL HEALTH	Testosterone, fertility, and sexual function in men and women.
ENDOCRINE · THYROID & MENOPAUSE	Thyroid indices and climacteric symptoms.
COGNITION & NEUROPSYCHIATRIC	Memory, executive function, bipolar and paediatric cognition.
SAFETY & TOLERABILITY	Short-term and 12-month human safety across organ systems.

EXTRACT STANDARDISATION

Source	Withania somnifera root only · full-spectrum · KSM-66® by Ixoreal Biomed
Standardised to	≥5% withanolides by HPLC · batchwise third-party verified
Clinical dose	250–675 mg/day across trials · 600 mg/day the most studied

CLINICAL EVIDENCE TABLE · I

SECTION 04A

Stress, mood *and sleep*.

STRESS, ANXIETY & MOOD

Stress and anxiety in chronically stressed adults

Chandrasekhar 2012 · Indian J Psychol Med · n=64 · 600 mg/day · 60 days · RDBPC

Serum cortisol −27.9% vs placebo (P=0.0006); Perceived Stress Scale −44%; GHQ-28 −72.3%; DASS −71.6%. The landmark KSM-66® stress trial.

Adaptogenic and anxiolytic effect in healthy adults

Salve 2019 · Cureus · n=58 · 250 & 600 mg/day · 8 weeks · RDBPC

Significant reductions in stress, anxiety, and serum cortisol vs placebo; 600 mg/day more efficacious than 250 mg/day.

Body-weight management under chronic stress

Choudhary 2017 · J Evid Based Complement Altern Med · n=52 · 600 mg/day · 8 weeks · RDBPC

Lower serum cortisol and perceived stress; reduced body weight, BMI, and food-craving scores vs placebo.

SLEEP

Insomnia and anxiety

Langade 2019 · Cureus · n=60 · 600 mg/day · 10 weeks · RDBPC

Reduced sleep-onset latency (~29%); improved sleep quality and efficiency; benefit strongest in diagnosed insomnia.

Sleep quality in healthy adults and insomnia patients

Langade 2021 · J Ethnopharmacol · n=80 · 600 mg/day · 8 weeks · RDBPC

Actigraphy-validated gains in sleep quality, onset latency, and mental alertness on rising; reduced anxiety.

Sleep quality and recovery in healthy adults

Deshpande 2020 · Sleep Medicine · n=150 · 600 mg/day · RDBPC

Significant improvement in self-reported sleep quality, sleep efficiency, and recovery versus placebo.

General well-being and sleep in the elderly

Kelgane 2020 · Cureus · n=50 · 600 mg/day · 12 weeks · RDBPC

Improved sleep quality, quality of life, and mental alertness on rising in older adults; well-tolerated.

CLINICAL EVIDENCE TABLE · II

SECTION 04A

Performance *and hormones*.

STRENGTH, ENDURANCE & RECOVERY

Muscle strength, size, and recovery with resistance training

Wankhede 2015 · J Int Soc Sports Nutr · n=57 · 600 mg/day · 8 weeks · RDBPC

Bench-press 1-RM +46 vs +26 kg; greater muscle size and testosterone rise; body fat −3.5%; lower creatine kinase (faster recovery).

Cardiorespiratory endurance and VOmax

Choudhary 2015 · Ayu · n=50 · 600 mg/day · 8 weeks · RDBPC

Significant improvement in VO_2max and quality-of-life scores in athletic adults versus placebo.

Physiological stress response in team-sport athletes

2026 · Frontiers in Nutrition / Nutrients · 600 mg/day · RDBPC

Sex-specific benefits: improved recovery perception in women and greater lower-body strength in men during pre-season training.

SEXUAL & HORMONAL HEALTH

Spermatogenic activity in oligospermic men

Ambiye 2013 · Evid Based Complement Alternat Med · n=46 · 675 mg/day · 90 days · RCT

Sperm count +167%; semen volume +53%; motility +57%; serum testosterone +17%. Well-tolerated, no adverse events.

Sexual function in women

Dongre 2015 · BioMed Research International · n=50 · 600 mg/day · 8 weeks · RDBPC

Significant gains in Female Sexual Function Index — arousal, lubrication, orgasm, and satisfaction — versus placebo.

Sexual health in healthy women

Ajgaonkar 2022 · Cureus · 600 mg/day · 8 weeks · RDBPC

Improved sexual-function scores and reduced sexual distress versus placebo in healthy women.

Well-being and sexual performance in adult men

Chauhan 2022 · Health Science Reports · 600 mg/day · RCT

Improved general well-being and self-reported sexual performance versus placebo.

CLINICAL EVIDENCE TABLE · III

SECTION 04A

Endocrine, cognition *and safety*.

ENDOCRINE · THYROID & MENOPAUSE

Subclinical hypothyroidism

Sharma 2018 · J Altern Complement Med · n=50 · 600 mg/day · 8 weeks · RDBPC

Normalised thyroid indices: serum TSH reduced; free T3 and free T4 increased versus placebo — supports without overshooting homeostasis.

Climacteric symptoms in perimenopausal women

Gopal 2021 · J Obstet Gynaecol Res · 600 mg/day · 8 weeks · RDBPC

Reduced menopausal (climacteric) symptom scores and supported hormone balance versus placebo.

COGNITION & NEUROPSYCHIATRIC

Memory and cognitive function

Choudhary 2017 · J Diet Suppl · n=50 · 600 mg/day · 8 weeks · RDBPC

Gains in immediate and general memory, executive function, attention, and information-processing speed versus placebo.

Cognition in healthy, stressed adults

Gopukumar 2021 · Evid Based Complement Alternat Med · 600 mg/day · 90 days · RDBPC

Improved cognitive performance — memory, attention, executive function — with reduced stress versus placebo.

Cognitive dysfunction in bipolar disorder (adjunct)

Chengappa 2013 · J Clin Psychiatry · 500 mg/day · 8 weeks · RDBPC

Adjunctive KSM-66® improved auditory-verbal working memory and reaction time versus placebo in bipolar disorder.

Cognition, sleep, and fatigue in children 6–12 years

Saxena 2026 · Frontiers in Nutrition · n=85 · 150 mg twice daily · 8 weeks · RDBPC

Improved attention, memory, and executive function (COMPASS) with better sleep; well-tolerated in children.

SAFETY & TOLERABILITY

Safety in healthy volunteers

Verma 2021 · Complementary Therapies in Medicine · RDBPC

No clinically significant changes in vital signs, blood, hepatic, renal, or thyroid parameters; well-tolerated.

Twelve-month long-term safety

Verma 2022 · prospective observational · n=191 · 12 months

No significant hepatic, renal, or thyroid change; testosterone rose modestly; 68.7% of participants showed overall clinical improvement.

Principal published human trials shown. KSM-66®'s clinical programme comprises more than 50 human studies (Ixoreal Biomed); full citations in Section 16.

THE MECHANISM

SECTION 07

How *KSM-66®* works.

Six pathways, working in parallel. Identified across two decades of preclinical and clinical research on the standardised root extract.

01 HPA-axis modulation

Withanolides act on the hypothalamic-pituitary-adrenal axis to normalise excess cortisol — the central mechanism behind the 27.9% cortisol reduction.

02 GABAergic calming

Ashwagandha shows GABA-mimetic activity, calming the nervous system and supporting sleep onset rather than sedating it.

03 Withanolide actives

The root is standardised to ≥5% withanolides, the steroidal lactones responsible for most of ashwagandha's measured effects.

04 Androgen support

In men, KSM-66® supports the HPG axis, raising serum testosterone and improving spermatogenic parameters.

05 Cardiorespiratory

Improved VO_2max and recovery point to enhanced mitochondrial and oxygen-handling capacity under physical load.

06 Antioxidant balance

Reduction of oxidative stress markers underlies the adaptogenic restoration of physiological homeostasis.

THE CLEAN LABEL STANDARD

SECTION 08

What is *not in* the capsule.

A clean label is a manufacturing decision, not a marketing claim. The list specifies what was deliberately excluded.

Most ashwagandha capsules carry ingredients that serve the production line, not the patient. Magnesium stearate as a flow agent. Silicon dioxide as an anti-caking agent. Starch or microcrystalline cellulose as filler. Cheaper leaf material to lift the withanolide number.

None of these are present. The shell is vegetarian HPMC. The fill is 500 mg of full-spectrum KSM-66® root extract and nothing else.

The trade-off is real. Removing flow agents slows encapsulation; removing fillers demands tighter dose-uniformity. The cost per capsule is higher. It is a deliberate choice.

NOT IN THE CAPSULE

- **Magnesium stearate**
  Flow agent
- **Silicon dioxide**
  Anti-caking agent
- **Microcrystalline cellulose**
  Filler / bulking agent
- **Leaf material**
  Withanolide inflation
- **Titanium dioxide**
  Opacity agent
- **Synthetic colours**
  Aesthetic colorants
- **Gelatin**
  Animal-derived shell
- **Proprietary blends**
  Undisclosed mixtures

THE COMPARISON

SECTION 09

The verified *root extract*.

The difference between The Proven Code KSM-66® and generic ashwagandha is not visible from the front of the pack. The table makes it explicit.

ATTRIBUTE	THE PROVEN CODE	GENERIC
Branded ingredient	• KSM-66® · Ixoreal Biomed	– Generic, unbranded
Plant part	• Root only · full-spectrum	– Often root + leaf, or undisclosed
Withanolides	• ≥5% · batch-verified by HPLC	– Claimed, rarely tested
Published human trials	• 50+ studies on this extract	– Generic citations only
Source traceability	• Source to shelf	– Often undisclosed
Format	• 10-cap clinical blister	– Loose bottle
Per-batch lab report	• Every batch	– Inconsistent or none
Extraction	• Green chemistry, solvent-free	– Often solvent-based
Fillers & binders	• Zero	– Multiple
Capsule	• Vegetarian HPMC	– Often gelatin

INDICATIONS

SECTION 10

Who this is *for*.

The conditions for which the published KSM-66® evidence base supports a clinically meaningful role, as an adjunct under professional guidance.

CHRONIC STRESS

Elevated cortisol · burnout

Strongest direct evidence. Chandrasekhar 2012 showed 27.9% cortisol reduction and large falls in perceived stress.

ANXIETY & LOW MOOD

Adjunct to lifestyle / therapy

Significant improvement across DASS and GHQ-28 anxiety and stress subscales in controlled trials.

SLEEP DISTURBANCE

Poor onset · non-restorative sleep

Langade 2019 improved sleep onset latency, total sleep time, and efficiency, strongest in insomnia.

PHYSICAL PERFORMANCE

Strength · recovery · endurance

Wankhede 2015 and Choudhary 2015 showed gains in strength, testosterone, recovery, and VO_2max.

MALE FERTILITY

Low testosterone · oligospermia

Ambiye 2013 showed marked gains in sperm count, motility, and serum testosterone over 90 days.

COGNITIVE SUPPORT

Memory · focus

Choudhary 2017 improved immediate and general memory, attention, and information-processing speed.

DOSE & USE

SECTION 11

How to *take it*.

KSM-66® has been studied across 250–675 mg/day, with 600 mg/day the most studied dose for stress. Each capsule delivers 500 mg, within the clinically studied range.

RECOMMENDED DAILY DOSE

500 mg

One capsule of 500 mg KSM-66®, once daily, or as directed by a healthcare professional.

STUDIED RANGE

250–675 mg/day

600 mg/day is the most studied stress dose; clinicians may direct two capsules where the 600 mg protocol applies.

USAGE GUIDANCE

Timing	With food, morning or evening. For sleep support, an evening dose is common.
Consistency	Effects build gradually; trials measured outcomes at 8 to 12 weeks of daily use.
Duration	Well-tolerated for extended use; 12-month human safety data on record.
Hydration	Take with a full glass of water.
Storage	Cool, dry place, away from sunlight. 36-month shelf life from manufacture.

TESTING & TRANSPARENCY

SECTION 12

Every batch. *Lab-verified*.

Each lot ships with a third-party laboratory report. Identity, potency, purity, heavy metals, and microbial profile are tested on the finished product, every batch.

IDENTITY

KSM-66® identity HPLC reference match	Confirmed
Botanical Withania somnifera	Confirmed
Plant part Root only	Confirmed
Appearance Fine brown powder	Complies

POTENCY

Withanolides ≥5% (HPLC)	Complies
Capsule fill 500 mg ± 5%	Complies
Loss on drying Within spec	Complies
Assay Per CoA	Complies

PURITY

Pesticide residues Full spectrum	Negative
Aflatoxins (B1 B2 G1 G2) Below detection	Absent
Residual solvents Aqueous extraction	Absent
ETO residues Not ETO-treated	Absent

HEAVY METALS

Lead (Pb) Within limits	Complies
Arsenic (As) Within limits	Complies
Mercury (Hg) Within limits	Complies
Cadmium (Cd) Within limits	Complies

MICROBIAL PROFILE

Total plate count NMT 10^4 cfu/g	Complies
Yeast & mould NMT 10^3 cfu/g	Complies
E. coli Absent	Absent
Salmonella Absent	Absent
S. aureus Absent	Absent

HPLC IDENTIFICATION

The withanolide profile is resolved by HPLC and matched against the KSM-66® reference chromatogram. Total withanolides are quantified at ≥5% per lot, confirming both authentic KSM-66® identity and labelled potency.

A third-party Certificate of Analysis accompanies every batch.

BATCHWISE THIRD-PARTY CoA PER LOT · MANUFACTURED BY DIOR PHARMACEUTICALS · WHO-GMP, ISO 9001:2015

SAFETY & SUITABILITY

SECTION 13

Who it is for. *Who it isn't*.

KSM-66® carries a 12-month human safety record and a long history of traditional use. Review the contraindications before initiating supplementation.

DO NOT USE IF

- Pregnant or lactating. Insufficient safety data in these cohorts.
- Under 18 years. No paediatric trial data.
- Hyperthyroidism or on thyroid medication, without supervision — may raise thyroid hormones.
- Active autoimmune disease (lupus, RA, Hashimoto's), without supervision.
- Scheduled for surgery within 2 weeks — discontinue ahead of any procedure.
- Known sensitivity to Withania somnifera or nightshade plants.

CONSULT A CLINICIAN IF

- Taking sedatives, anxiolytics, thyroid, antidiabetic, or antihypertensive medication.
- On immunosuppressant therapy.
- Diagnosed with a condition affecting liver or kidney function.
- Persistent gastrointestinal symptoms develop after starting use.

ON TOLERANCE

A 12-month human safety study (n=191) recorded no significant change in hepatic, renal, or thyroid function — and KSM-66® has shown no liver-enzyme elevation even at high long-term doses. Reported side effects across trials are rare and mild: occasional drowsiness or mild gastrointestinal upset.

THE PROOF STACK

SECTION 14

Every claim. *Proven*.

A summary of every proof point in this dossier, with the section in which it is documented.

01	50+ published human clinical studies on KSM-66®	Section 04
02	Most clinically studied ashwagandha root extract	Section 04
03	27.9% serum cortisol reduction (Chandrasekhar 2012)	Section 05
04	Strength, testosterone & recovery gains (Wankhede 2015)	Section 06
05	≥5% withanolides, batchwise third-party verified	Sections 02, 12
06	Full-spectrum, root-only extract	Sections 02, 03
07	Green-chemistry extraction, no solvents	Sections 02, 12
08	Zero fillers, binders, or additives	Section 08
09	India's first KSM-66® clinical blister format	Sections 02, 15
10	WHO-GMP / ISO 9001:2015 manufacturing	Section 12

Every claim. *Proven.*

AVAILABLE FORMATS

SECTION 15

India's first KSM-66® *clinical blister*.

Supplied in a batch-stamped blister built for the medical channel — the first of its kind for KSM-66® in India.



CLINICAL BLISTER PACK

10 vegetarian capsules

Batch-stamped blister strip of 10 HPMC capsules in a monocarton, 500 mg KSM-66® each. Built for clinic dispensing, patient sampling, and lot-level verification.

ALSO AVAILABLE

30-capsule pack · 30-day course at one capsule daily.

CONTACT

COMPANY
Nuvea Essentials (OPC) Pvt Ltd

ADDRESS
Plot 94, Sector 13, Dwarka, New Delhi 110075

GSTIN
07AAJCN9383M1ZL

ORDER ENQUIRIES contact@theprovencode.com

REFERENCES & DOCUMENTATION

SECTION 16

The *citations*.

Primary references underlying the claims in this dossier. Full references and batch lab reports available on request.

01 **Chandrasekhar K, Kapoor J, Anishetty S. 2012.** Stress and anxiety in adults. Indian J Psychol Med 34(3):255–262. n=64, 60 days.

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16 **Gopukumar K, Thanawala S, Somepalli V, et al. 2021.** Cognition in stressed adults. Evid Based Complement Alternat Med 2021:8254344.

17 **Chengappa KNR, Bowie CR, Schlicht PJ, et al. 2013.** Cognition in bipolar disorder (adjunct). J Clin Psychiatry 74(11):1076–1083.

18 **Verma N, Gupta SK, Tiwari S, et al. 2021.** Safety in healthy volunteers. Complement Ther Med 57:102642. 12-month safety, n=191.

19 **KSM-66® ingredient specification.** Ixoreal Biomed Inc., USA — full-spectrum root-only extract, ≥5% withanolides, green-chemistry process. Licence documentation on file.

KSM-66®'s clinical programme comprises 50+ human studies; the principal published trials are listed here. Full reference list and batch lab reports available on request.

COLOPHON

On this *dossier*.

PROOF DOSSIER · VOLUME IV · KSM-66 ASHWAGANDHA was researched, written, and designed by The Proven Code team in New Delhi.

Every claim in this document is sourced from primary documentation: the published peer-reviewed human trials on KSM-66®, the Ixoreal Biomed ingredient specification, the Dior Pharmaceuticals manufacturing protocol, and the batchwise third-party Certificate of Analysis on file.

Where reference is made to the wider ashwagandha literature, the connection to the KSM-66® full-spectrum, root-only extract is established. The trial data does not transfer to generic, unstandardised, or leaf-bearing ashwagandha material.

For clinical questions, batch-specific documentation, or distributor enquiries: contact@theprovencode.com

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